U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program MC#80 6/5/13 (27296)

## **ELEVATION CERTIFICATE**

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008 Expiration Date: July 31, 2015

	SECTION A - PROPERTY INFORMATION						FOR INSURANCE COMPANY USE	
A1.	Building Owner's Name Crosbie Group Myrtle Be	Policy Number:						
A2.	Building Street Address (Including Apt., Unit, Suite, and 181 Dowenbury Drive		o.) or <del>2</del> 0. Route		No.	Company NAIC		
	City Myrtle Beach		State	SC		ZIP Code 29	588	
A3.	Property Description (Lot and Block Numbers, Tax Parc Horry County TMS# 190-38-01-071, Lot #87, S	ommerset (	egal Description Cove Ph. II	1. e(c.)				
A4.	Building Use (e.g., Residential, Non-Residential, Additional Latitude (Lengthyde), Lett. 22427247			ntial				
A5. A6.	Latitude/Longitude: Lat. 33d37'24"  Attach at least 2 photographs of the building if the Cer		<b>9d01'51"</b> ing used to obta	ain floor	Horizontal	Datum: N	IAD 1927 ■ NAD 1983	
A7.	Building Diagram Number 1B							
A8.	For a building with a crawlspace or enclosure(s);	NA <sup>*</sup>			e building with an a		507/	
	<ul> <li>a) Square footage of crawlspace or enclosure(s)</li> <li>b) No. of permanent flood openings in the crawlspace</li> </ul>	00	sq ft	-	Square footage of a			
	enclosure(s) within 1.0 foot above adjacent grade	" NA	<b>W</b>		within 1.0 foot above		ngs in the attached garage ide NA	
	c) Total net area of flood openings in A8.b	<del></del>	sq in		Total net area of flo			
	d) Engineered flood openings?				Engineered flood or		]Yes ⊠No	
	SECTION B - FLOO				RM) INFORMATI	ON		
B1.	NFIP Community Name & Community Number Horry County 450104	B:	2. County Name forry County	;			B3. State SC	
	Map/Panel Number   B5. Suffix   B6. FIRM Index		7. FIRM Panel E		68. Flood Zone		e Flood Elevation(s) (Zone	
	45051C0732 H 09/17/20	03 /	Revised Date 12/03/20		AE	A0, 1	use base flood depth) 23	
B10	Indicate the source of the Base Flood Elevation (BFE) o	lata or base	flood depth ent	ered in its	em 89: 24-203P-12-03-0			
B11	Indicate elevation datum used for BFE in Item 89:	Nevo 19			Other/Sourc			
							XI NO	
B12.Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes Signation Date: / CBRS OPA								
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)								
C1.	Building elevations are based on: Construction *A new Elevation Certificate will be required when cons	n Drawings*	☐ Buildir	ug Under	Construction*	Finished	Construction	
C2,	C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE. V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  Benchmark Utilized: 26 202 Vertical Datum: NGVD 1929							
	Indicate elevation datum used for the elevations in item	ne a) through				□ 0+5/0-		
	Datum used for building elevations must be the same a	ns a) unougr as that used	for the BFE.	494D 19.	_			
	a) Top of bottom floor (including basement, crawispace			24 50	Check the r	neasurement ( et		
	b) Top of the next higher floor	,		NA .		=		
	c) Bottom of the lowest horizontal structural member (	V Zones only	。 二	VA .	☐ fee			
	d) Attached garage (top of slab)			<u>24 00</u>		-		
	<ul> <li>e) Lowest elevation of machinery or equipment servicing (Describe type of equipment and location in Comment</li> </ul>	nts)		<u>24 . 26</u>	S fee	et 🗌 meters	3	
	f) Lowest adjacent (finished) grade next to building (LA			<u> 22 . 5 (</u>	🔀 fee	t 🗌 meters	5	
	g) Highest adjacent (finished) grade next to building (H			<u>23</u> . <u>7 ·</u>				
	<ul> <li>h) Lowest adjacent grade at lowest elevation of deck o structural support</li> </ul>	r stairs, inch	uding	<u>23</u> . <u>8</u> _	∠ <b>⊠</b> fee	et 🔲 meters	S	
	SECTION D - SURV	EYOR, ENG	INEER, OR A	RCHITE	CT CERTIFICAT	ION	Λ	
his c	ertification is to be signed and sealed by a land surveyo	or, engineer, o	or architect auth	orized by	law to certify eleva			
nform unde	ation. I certify that the information on this Certificate representation on this Certificate represent may be punishable by file	presents my l ne or impriso	best efforts to in nment under 18	terpret th U.S. Cod	ne data available. le, Section 1001.		/ / / / /	
3 Ch	ack here if comments are provided on back of form, ack here if attachments.		ide and longitud ind surveyor?	e in Sect	lon A provided by a	/	YIIIV	
Jeffr	er's Name ey D. Solan			License 19407	Number		631-13	
Title Pres	ident / //	Company N Solan As	lame Isociates, P.C				1111/2017	
Addre		City Conway		State SC	ZIP Code 29526	\	116	
Signa		Date 05/31/20	13	Telephone		─ <b>┤</b> │	1.41	

FEMA Form 086-0-13 (7/12)

See reverse side for continuation.

Replaces all previous editions.

## ELEVATION CERTIFICATE, page 2

MPORTANT: In these spaces, cop Building Street Address (including		FOR INSURANCE COMPANY USE				
181 Dowenbury Drive	Apt., Unit, Suite, and/or Bldg. No.) or RO.	route and Box No.		Policy Number:		
ity Myrtle Beach	State SC	ZIP Code 29588		Company NAIC Number:		
SECT	ion D – Surveyor, Engineer, of	ARCHITECT C	ERTIFICATION (C	ONTINUED)		
Copy both sides of this Elevation Comments	Certificate for (1) community official, (2) ins	urance agent/com	pany, and (3) building	ng owner.		
Ormicus						
Signature	·	Date				
	ELEVATION INFORMATION (SURVE)					
or Zones AO and A (without BFE), or Items E1-E4, use natural grade	complete Items E1-E5. If the Certificate is e, if available. Check the measurement use	intended to support	ort a LOMA or LOMR	Frequest, complete Sections A. B.and		
Provide elevation information for grade (HAG) and the lowest adj	or the following and check the appropriate	boxes to show who	ether the elevation is	s above or below the highest adjacent		
	g basement, crawlspace, or enclosure) is		. [] feet [] met	ers above or below the HAG.		
	basement, crawispace, or enclosure) is	<del></del>	☐ feet ☐ met			
	permanent flood openings provided in Sec	ction A Items 8 and				
the next higher floor (elevation i 3. Attached garage (top of slab) is	C2.b in the diagrams) of the building is	<del></del>	feet met			
		•	. Ifeet I met			
	nd/or equipment servicing the building is					
ordinance? Yes No	number is available, is the top of the bott Unknown. The local official must certify	om noor elevated i this information in	section G.	le community's floodplain managemen		
SECTI	ON F - PROPERTY OWNER (OR OV	VNER'S REPRE	SENTATIVE) CER	TIFICATION		
one Au must sign here. The state	orized representative who completes Sect ments in Sections A, B, and E are correct	ons A, B, and E fo o the best of my k	r Zone A (without a l nowledge.	FEMA-Issued or community-issued BFE		
Property Owner or Owner's Authorize	ed Representative's Name					
ddress		City	St	ate ZIP Code		
ignature		Date	Te	lephone		
omments						
	SECTION & - COMMUNITY	/ INCODMATION	(OPTIONAL)	☐ Check here if attachment		
he local official who is authorized to	y law or ordinance to administer the commu			can complete Sections & B. C (or F)		
or this Elevation Certificate. Comp	sete the applicable item(s) and sign below.	Check the measure	ment used in items (	G8–G10. In Puerto Rico only, enter meti		
31. The information in Section who is authorized by law to	C was taken from other documentation to	hat has been sign	ed and sealed by a	licensed surveyor, engineer, or archite		
32. A community official compl	o certify elevation information, (Indicate t eted Section E for a building located in Zo	ne Source and Dat ne A (without a FFI	e or the elevation of	initialismed AFF) or Zone AO		
3. The following information (	(Items G4-G9) is provided for community	floodplain manage	ement purposes.	antighastica bit is or zone no.		
4. Permit Number	G5. Date Permit Issued			Compliance/Occupancy Issued		
		- 50	. Date Certificate Of	Compliance/ Occupancy Issues		
77. This permit has been issued for		itial Improvement				
	or (including basement) of the building:		☐ feet ☐ mete			
<ol> <li>BFE or (in Zone AO) depth of f- i10. Community's design flood elev</li> </ol>			☐ feet ☐ mete			
ocal Official's Name	u 10011	Tible	☐ feet ☐ mete	rs Datum		
		Title		······································		
ommunity Name		Telephone				
ignature	·	Date				
Comments						
				Charle have if attention		
MA Form 096 0 22 /2//20				Check here if attachment		
MA Form 086-0-33 (7/12)				Replaces all previous edition		